

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 939 OF 6191

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Stand for America PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GABB, ALEXANDER, , ,			Date of Receipt M M / D D / Y Y Y Y Y 09 / 19 / 2021	
Mailing Address 827 BERKSHIRE DRIVE			Transaction ID : SA11A.913795	
City HYATTSVILLE	State MD	Zip Code 20783-3246	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) UNIVERSAL BALLET FOUNDATION		Occupation (for Individual) ACADEMIC DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 315.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GABY, BARBARA, , MRS.,			Date of Receipt M M / D D / Y Y Y Y Y 12 / 23 / 2021	
Mailing Address 445 OLD HOMESTEAD TRAIL			Transaction ID : SA11A.991417	
City JOHNS CREEK	State GA	Zip Code 30097-8027	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) RICHARD & BARBARA GABY FOUNDATION		Occupation (for Individual) FOUNDER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GABY, RICHARD, , MR.,			Date of Receipt M M / D D / Y Y Y Y Y 12 / 23 / 2021	
Mailing Address 445 OLD HOMESTEAD TRAIL			Transaction ID : SA11A.991416	
City JOHNS CREEK	State GA	Zip Code 30097-8027	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) SELF-EMPLOYED		Occupation (for Individual) SELF-EMPLOYED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10035.00